

# Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	J.B.	70208	10-22-99
O.I.P.E. CLASSIFIER		7	10-28-99
FORMALITY REVIEW	BR CR	648857 64924	11-14-99 15-00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date				
Final	Original	05	06	07	08
1		09	02	10	03
2		22	01	21	04
3		23	02	20	15
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If more than 150 claims or 10 actions  
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